SWORN STATEMENT OF ASSETS, LIABILITIES AND NET WORTH

As of December 31, 2020 (Required by R.A. 6713)

Note: Husband and wife who are both public officials and employees may file the required statements jointly or separately. ☐ Separate Filing ☑ Not Applicable ☐ Joint Filing DECLARANT: POLIQUIT MARIA ARIES POSITION: INSTRUCTOR I VISAYAS STATE UNIVERSITY (Family Name) (First Name) (M.I.) AGENCY/OFFICE: ADDRESS: BRGY. STA. CRUZ BAYBAY CITY LEYTE OFFICE ADDRESS: BRGY. PANGASUGAN, BAYBAY LEYTE SPOUSE: POLIQUIT JOSE POSITION: N/A (M.I.) (Family Name) (First Name) AGENCY/OFFICE: OFFICE ADDRESS: UNMARRIED CHILDREN BELOW EIGHTEEN (18) YEARS OF AGE LIVING IN DECLARANT'S HOUSEHOLD DATE OF BIRTH AGE NAME KAYE ANGELINE O. POLIQUIT 08/07/2005 15 ASSETS, LIABILITIES AND NETWORTH (Including those of the spouse and unmarried children below eighteen (18) years of age living in declarant's household) 1. ASSETS **Real Properties*** ASSESSED CURRENT FAIR ACQUISITION ACQUISITION DESCRIPTION EXACT KIND (e.g. residential, commercial, industrial, agricultural and mixed COST (e.g. lot, house and lot, condominium and improvements) LOCATION VALUE MARKET VALUE (As found in the Tax Declaration of Real Property) YEAR MODE N/A Subtotal: b. Personal Properties* ACQUISITION DESCRIPTION YEAR ACQUIRED COST/AMOUNT 2015 89,000 KAWASAKI FURY MOTORCYCLE

	Subtotal:	327,000
PNB ALLIANZ INSURANCE	2020	18,000
APPLIANCES (TV, REFRIGERATOR, FREEZER, OVEN)	2020	101,000
YAMAHA AEROX	2020	119,000

327,000

TOTAL ASSETS (a+b):

^{*} Additional sheet/s may be used, if necessary.

2. LIABILITIES*

NATURE	NAME OF CREDITORS	OUTSTANDING BALANCE
MOTORCYCLE LOAN	DES MARKETING	27,000
APPLIANCE LOAN	RL APPLIANCE	10,000
CREDIT CARD	BPI	15,000
CREDIT CARD	RCBC	25,000

TOTAL LIABILITIES: 77,000

NET WORTH: Total Assets less Total Liabilities =

250,000

BUSINESS INTERESTS AND FINANCIAL CONNECTIONS

(of Declarant / Declarant's spouse/ Unmarried Children Below Eighteen (18) years of Age Living in Declarant's Household)

Z I/We do not have any business interest or financial connection.

NAME OF ENTITY/BUSINESS ENTERPRISE	BUSINESS ADDRESS	NATURE OF BUSINESS INTEREST &/OR FINANCIAL CONNECTION	DATE OF ACQUISITION OF INTEREST OR CONNECTION

RELATIVES IN THE GOVERNMENT SERVICE

(Within the Fourth Degree of Consanguinity or Affinity. Include also Bilas, Balae and Inso)

□ I/We do not know of any relative/s in the government service)

NAME OF RELATIVE	RELATIONSHIP	POSITION	NAME OF AGENCY/OFFICE AND ADDRESS
FE ESTRELITA ORTEGA	AUNT	TEACHER	DEPED R8
ELMA POLIQUIT	AUNT	TEACHER	DEPED R8
EDYBETH SOPA	SISTER IN LAW	TEACHER	DEPED R8
FRANCISCO ORTEGA	UNCLE	MUNICIPAL COUNCILOR	MUNICIPALITY OF HILONGOS
BENITO ORTEGA	FATHER	SECURITY GUARD	PCSO-CENTRAL OFFICE

I hereby certify that these are true and correct statements of my assets, liabilities, net worth, business interests and financial connections, including those of my spouse and unmarried children below eighteen (18) years of age living in my household, and that to the best of my knowledge, the above-enumerated are names of my relatives in the government within the fourth civil degree of consanguinity or affinity.

I hereby authorize the Ombudsman or his/her duly authorized representative to obtain and secure from all appropriate government agencies, including the Bureau of Internal Revenue such documents that may show my assets, liabilities, net worth, business interests and financial connections, to include those of my spouse and unmarried children below 18 years of age living with me in my household covering previous years to include the year I first assumed office in government.

Date: Apri	1 15/2021	11000		
	100	Wole	gmit	
(Signa	ature of Declarant)	(Signature o	f Co-Declarant/Spouse)	
Government Issued ID:	PHIL HEALTH ID	Government Issued ID:	LTO DRIVERS LICENSE	
ID No.:	01-025365423-1	ID No.:	HO3-19-001370	
Date Issued:	MAY 2014	Date Issued:	01/28/2019	
	-	1 C ADD 2024		

1 6 APR 2021

SUBSCRIBED AND SWORN to before me this 15th day of April, affiant exhibiting to me the above-stated government issued identification card.

(Person Administering Oath)

^{*} Additional sheet/s may be used, if necessary.